

Indiana State Police Clandestine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 01/23/2014
Incident #: 14ISPC000581
County: LAWRENCE

Address: John Williams Ave & Lincoln Ave
Bedford IN
47421

Type of Laboratory Seizure (check one)

- ☒ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☒ Vehicle
☐ Hotel/Motel
☐ Open - No Structure
☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ One Pot or Birch Reaction(s): _____
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Hydrochloric Acid Gas Generator(s): rear seat
☒ Flammable Solvents: behind rear seat
☒ Water Reactive Metal (Lithium): rear seat
☐ Anhydrous Ammonia: _____
☒ Corrosive Acid: under front seat
☐ Corrosive Base: _____
☐ Other (item and location): _____

Vehicle Information:

Owner: Katrina Saunders
VIN: 2T1LR32EX5C348902
Year: 2004

Make: Toyota
Model: Matrix

Child under age 18 discovered (check appropriate)

- ☐ Yes _____ (number present)
☒ No
☐ Children not present but evidence they reside or visit often

Living conditions of home: ☐ clean ☐ disarray
☐ unclean

Estimated length of time manufacturing had been occurring: _____

Additional Information: _____

This report has been faxed* or emailed to the following agencies that serve the location:

Fire Department City, Township or County TWP FD Fax: HAND DELIVERED
Health Department County: LAWRENCE CO Fax: 812-275-1094
Department of Child Services Hotline: dcshotlinereports@dcsh.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: Joshua Allen Phone 812-332-4411

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.